NEWTOWN BOARD OF REALTORS®, INC.

156 Round Hill Road, Fairfield, CT 06824 Phone: 203-319-0247 Fax: 203-259-3783

Application for Membership

I hereby apply for (Designated REALTOR®, REALTOR®) membership

(circle one)

By providing and/or updating your contact information, including any mobile or other phone numbers, you agree to be contacted by NAR, Connecticut REALTORS®, the Newtown Board of REALTORS®, and their agents via text messages, SMS messages and calls to cell phones including the use of pre-recorded electronic message calls, as well as calls made via automatic telephone dialing systems or via email. You further agree to update the association with any changes to your contact information and to permit the association to update contact information with information provided by any multiple listing service as part and continuation of this consent.

I irrevocably waive all claims against the Board or any of its officers, directors, or members, for any act in connection with the business of the Board, and particularly as to its or their acts in electing, or failure to elect, advancing, suspending, expelling, or otherwise disciplining me as an applicant, or as a member.

I hereby submit the following information for your consider	ation:		
Name as shown on R. E. License			
(please print) Real Estate License No			
Home Address/City/State/Zip			
	Cell Phon	ne	
	Home Phone		
Name of Firm			
Firm Address/City/State/Zip			
Firm Phone			
My title or position with the Firm: Principal Corporate C			
Send NAR/CAR mail to: Home Office		ependent Contrac	.01
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Amount of payment to NEWTOWN/NAR/CAR		and	
application fee			
PERSONAL DATA			
Name as you want it to appear in the roster:			
Place of Birth:Dat	ate of Birth:		
Have you ever held membership in this or any other Board?	Yes	No	
If so, where?	_ from	to	
(Name of Board)			
Have you paid NAR and/or CAR dues there this year?	Yes	No	
If yes, NRDS #			
If not , I agree to complete the orientation course within one yapplication.	ear from the	date of this	
Signed	Date		